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ABSTRACT

The move from formal institution living to an independent type of living situation was assessed in 18 mentally retarded adults with high (61-84) and low (56-39) IQ scores. Prior to and 6 months after the semi-independent living situation, Ss were administered the following measures: the Wechsler Adult Intelligence Scale, the AAMD (American Association on Mental Deficiency), Adaptive Behavior Scale, Burk's Behavior Rating Scales, a taped personal interview, and participation-observation situations where Ss were visited several times in their apartment. Among findings were that while none of the Ss could be deinstitutionalized, they can successfully live in a semi-independent type of living situation; that IQ does not play a role in adapting to the new environment; and that living in a more independent environment for 6 months does not help Ss to function more independently. (Author/SB)

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INDEPENDENT FUNCTIONING OF INSTITUTIONALIZED RETARDED ADULTS

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ABSTRACT

INDEPENDENT FUNCTIONING OF INSTITUTIONALIZED RETARDED ADULTS

by

Marilyn Aninger and Kaye Bolinsky

Purpose

The purpose of the present study was to assess the move from formal institution living to an independent type of living situation for mentally retarded adults. Was this a stepping stone to independence or a good alternative to deinstitutionalization? In addition, this study showed the value of this type of semi-independent living for the subjects, the institution and the community.

Method

18 mentally retarded adults, with an IQ range of 39-84, were moved from formal institution living to semi-independent apartment living. Prior to the semi-independent living and 6 months after, three measures were used to assess the move. The measure included: 1) The AAMD Adaptive Behavior Scale; 2) Burks' Behavior Rating Scales; and 3) a half-hour taped personal interview conducted by the authors. IQ scores for the subjects were broken into two groups consisting of high (61-84) and low (56-39).

Results

Data were submitted to multivariate analysis of variance with repeated measures procedures. The design consisted of IQ (High/Low) x Test occasion (Pre-Post) arrangement of independent variables. The design allowed for the testing of three effects: 1) IQ; 2) Test occasions; and 3) Interaction of IQ level and Test occasion.

Discussion and Conclusions

The most significant result of the study was that while none of these adults could be deinstitutionalized, they can live successfully in a more independent type of living situation. Apparently though, living in a more independent environment for six months does not help them to function more independently. Analysis of the data clearly indicates that IQ does not play a role in adapting to the new environment. This type of living situation is a unique and happy alternative to remaining inside the institution or being sent to live in the community without help. It is not a transition to completely independent living as it exists now, only a living situation which maximizes each resident's potential. Certainly the apartments are a better place to carry on rehabilitation than the institution.

INDEPENDENT FUNCTIONING OF INSTITUTIONALIZED RETARDED ADULTS

by

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Introduction

Many retarded adults living in institutions both private and public could be living more independently in a supervised situation. Institutions have shown concern over both deinstitutionalization of their more adequately adjusted adults and continued residence in the institution. In a suburb of San Diego, California, 19 mentally retarded adults, living in the largest private residential facility for the mentally retarded in Southern California, were transferred from formal institution living to an apartment complex situated next to the institution, but in no way connected or enclosed within it. Two adults live in each apartment, most of which have a living room, bedroom, kitchen and bathroom. A counselor lives in one of the apartments. Although these men and women live in this environment successfully, doing all their own cooking, cleaning, shopping, and dealing with leisure time activities, they would not be socially or occupationally competent to live without help. Only one subject (with the highest IQ) has a job in the community for ten hours per week. Another

subject (who scored in the normal range on the performance part of the WAIS) is employed at a workshop in town. The other subjects work at on-the-site jobs, in the institution, or do not work.

A study by Edgerton (1967) of residents discharged from Pacific State Hospital disclosed that only 3 of the final 48 subjects "made it" or "melted into the community". The others were marginally economic, had major debts, no job security and no marketable skills. They lived in slums. This is after years of vocational experience outside the hospital and after several periods of reinstitutionalization before final discharge. The remaining 45 subjects existed solely because they had varying degrees of help from "benefactors".

The purpose of the present study was to assess the move from formal institution living to an independent type of living situation. Was this move a stepping stone to independence or a good alternative to deinstitutionalization? In addition, this study showed the value of this type of semi-independent living for the subjects, the institution and the community.

Method

Subjects

Originally, 19 subjects were transferred from the main part of the institution to the apartments, but one moved back to the institution because of seizures. The study population then consisted of 18 retarded adults between the ages of 21 and 56. There were 13 men and 5 women with an IQ range of 39 to 84.

Measures

The following instruments were administered to each subject: (a) The Wechsler Adult Intelligence Scale; (b) The AAMD Adaptive Behavior Scale, 1974 Revision; (c) Burk's Behavior Rating Scales; (d) a half-hour taped personal interview conducted by the authors in which 10 questions were asked and pictures taken of each subject; and (e) Participation-observation situations where each subject was visited several times in their apartment and observed cleaning, fixing food, doing laundry and preparing to use city transportation. Much time was spent by the authors in social situations having coffee and chatting with the subjects.

The subjective questions in the interview were operationalized by a Q sort and the answers rated on a scale from 1 to 5 that included: most independent, somewhat independent, ambivalent about independence, a little

independent and not independent. Interrater reliability was high (.92 for the pre interview and .95 for the post interview).

Procedure

To assess if this type of move increased the subjects general independent functioning, only the appropriate sections of the adaptive behavior scales and interviews were used. The first section on Independent Functioning of the AAMD Adaptive Behavior Scale, the section on Excessive Dependency on the Burks' Behavior Rating Scales, and the question dealing with how long the subjects would like to remain in the apartments were used. All three measures were taken before the formal move from the institution to the apartments and again six months after the subjects had been living in the apartments.

The AAMD Adaptive Behavior Scales were filled out by staff members who knew the subjects the best while in the institution. After the move to the apartments, the counselor filled out the scales. Burks' Behavior Rating Scales were filled out on both occasions by counselors well acquainted with the subjects behavior. The WAIS was given by a person thoroughly trained in testing of the mentally retarded. Each test was tape recorded. The half-hour personal interview and participation-observation situations were conducted by the authors.

The IQ scores were broken into two groups consisting of high (61-84) and low (56-39).

Results

Means and standard deviations for the AAMD Adaptive Behavior Scale, the Burks' Behavior Rating Scales, and the interview are displayed in Table 1.

Data were submitted to multivariate analysis of variance with repeated measures procedures. Pre- and Posttest scores were derived from the AAMD Adaptive Behavior Scale, Burks' Behavior Ratings Scales and the question constructed by the experimenters in the interview. The design consisted of an IQ (High/Low) x Test occasion (Pre-Post) arrangement of independent variables. The design allowed for the testing of three effects: (1) IQ; (2) Test occasions; and (3) Interaction of IQ level and Test occasion.

The magnitude of the IQ x Test occasion interaction failed to exceed chance expectation. This was interpreted as apparently consistent gains for both IQ groups. The IQ groups failed to differ for the High/Low subjects. A strong trend associated with a Pre-Post difference was identified (Wilks' $\Lambda = .643$, $F = 2.59$, $df = 3/14$, $P < .10$). The composite identified as influencing was [2 x Burks' - AAMD - Interview]. This is, the AAMD and the interview's discrepancy from the Burks'.

Discussion and Conclusions

The most significant result of the study was that while none of these adults could be deinstitutionalized, they can live successfully in a more independent type of living situation. Apparently though, living in a more independent environment for six months does not help them to function more independently as measured by the AAMD Adaptive Behavior Scale, the Burks' Behavior Rating Scales (which was designed for use on normal individuals), or the personal interview.

The personal interview certainly showed how much the subjects were looking forward to this type of living situation and how happy they are with it at present. The subjects' perceptions of independent living failed to show a difference from the time they were in the institution to six months after they had lived in the apartments, called "The Village". Not one subject expressed the slightest desire to return to his previous unit in the institution. At the same time, there was only one subject who expressed a desire to live in the community independently, after six months of living in the apartments. One couple wanted to get married and would move to the community only because "The Village does not accept married couples". Two other subjects expressed that they would like to live in their present placement a year or so, but none expressed an

interest to live independently. The subjects mentioned living with sisters or parents. 13 of the subjects considered "The Village" a permanent placement and hoped they would live there "the rest of their lives".

Analysis of the data clearly indicates that IQ does not play a role in adapting to the new environment. Independent behavior and IQ do not appear to be related. This supports other studies that levels of measured intelligence do not appear to have a relationship to the subjects' ability to adapt to a semi-independent type of living environment. This type of living situation is for any adult that can adjust regardless of IQ. This study showed that the subject with a 39 IQ was as successfully adapted as was the subject with an 84 IQ. IQ, however, may be related to vocational competence, as the only subject with a job in the community had the highest IQ.

This type of living situation is a unique and happy alternative to remaining inside the institution or being sent to live in the community without help. It is not a transition to completely independent living as it exists now, only a living situation which maximizes each resident's potential. None of the subjects could face our complex, technological society of today alone. They will probably never be independent to the degree that it takes to support oneself, cope with everyday problems and meet social needs without help. If the residents were released from this

semi-protective environment they would not be capable of the behaviors necessary to be called an independent person.

Certainly "The Village" is a better place to carry on rehabilitation than the institution. In the event that a resident would at some future time, live with a relative or dedicated friend, "The Village" would have prepared them well. But without a relative or other interested parties, the semi-independent living in the apartments is ideal.

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TABLE 1

Mean Scores and Standard Deviations (SDs) on the AAMD Adaptive Behavior Scale, Burks' Behavior Rating Scales, and the interview.

Measure	<u>High IQ Group</u>				<u>Low IQ Group</u>			
	<u>Pre-test</u>		<u>Posttest</u>		<u>Pre-test</u>		<u>Posttest</u>	
	Mean	SD	Mean	SD	Mean	SD	Mean	SD
AAMD	81.59	12.41	87.59	11.73	82.88	10.06	86.88	13.44
Burks	11.10	4.07	10.30	2.50	14.13	4.61	10.50	2.92
Interview	9.00	4.37	9.10	4.25	9.00	1.51	8.88	2.23